



333269 WEMHH/SB/21 (6/04)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/714,693
		Filing Date	November 17, 2003
		First Named Inventor	S. Paul Reynolds
		Art Unit	3641
		Examiner Name	Lulit Semunegus
Total Number of Pages in This Submission		Attorney Docket Number	6146-36

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="text" value=""/>	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or individual name	Douglas A. Collier Woodard, Emhardt, Moriarty, McNett & Henry LLP
Signature	
Date	February 23, 2005

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below

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Signature	
Date	Feb. 23, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Q1 P/E
FEB 28 2005
PATENT & TRADEMARK OFFICE
SCT/13

FEES TRANSMITTAL FOR FY 2005

Effective 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act (H.R. 4818).

 Applicant claims small entity status. See 37 CFR 1.27

Total Amount of Payment (\$ 510.00)

Complete if Known

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Filing Date	November 17, 2003
First Named Inventor	S. Paul Reynolds
Group Art Unit	3641
Examiner Name	L. Semunegus
Attorney Docket Number	6146-36

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit card	<input type="checkbox"/> Money	<input type="checkbox"/> Other	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account:			Deposit Account Number	23-3030	Deposit Account Name Woodard, Emhardt, Moriarty, McNett & Henry LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) during the pendency of this application, excluding the payment of issue fees

 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION:****1. BASIC FILING, SEARCH AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$) **Small Entity Fee (\$)**

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total Claims**Extra Claims****Fee (\$)****Fee Paid (\$)****Multiple Dependent Claims**

23 -23 or HP = 0 x _____ = 0
(HP = highest number of total claims paid for, if greater than 20)

Fee (\$)**Fee Paid (\$)**

3 -3 or HP = 0 x _____ = 0
(HP = highest number of independent claims paid for, if greater than 3)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

= _____ / 50 = _____ (round up to a whole number) x _____ = _____

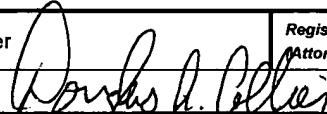
Fee Paid (\$)**4. OTHER FEE(S)**

Non-English Specification. \$130 fee (no small entity discount)

Other: Request for Extension of Time

\$510

SUBMITTED BY:

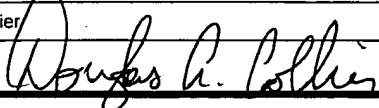
Name (Print/Type):	Douglas A. Collier	Registration No.: 43,556	Telephone: (317)634-3456
Signature:			Date: Feb. 23, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

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Name (Print/Type) Douglas A. Collier

Signature



Date

Feb. 23, 2005